

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
UTILITY PATENT APPLICATION TRANSMITTAL

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: **Daniel C. Sigg et al.**
TITLE: **ELECTROPORATION CATHETER WITH SENSING CAPABILITIES**

CERTIFICATE UNDER 37 CFR §1.10: I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, *EXPRESS No. EV 323 972 095 US, on this 25th day of August, 2003.

17886 U.S. PTO
10/64/522
08/25/03

MOLLY CHLEBECK
Printed Name
Molly Chlebeck
Signature

MAIL STOP PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

We are transmitting herewith the attached:

X **Patent Application Transmittal**

X **Specification:**

Total pages: 22 (including claims and abstract: Spec. 15 sheets; Claims 6 sheets; Abstract 1

X **Drawings:**

Total sheets: 5

☒ formal ☐ informal

☒ **Combined Declaration and Power of Attorney:**

☒ unexecuted

☐ copy from prior application

☐ Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))

☐ Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*

X **Accompanying application parts:**

☐

Notification of filing a

☐

Assignment of the Invention to Medtronic, Inc.

☐

Assignment cover sheet

☐

Information Disclosure Statement

☐

PTO Form 1449

☐

Copies of IDS citations

☐

Preliminary Amendment

☐

A copy of the Petition or Conditional Petition for Extension of Time in the prior application.

X

Return Postcard

IF A CONTINUING APPLICATION:

☐

Continuation
No. .

☐

Divisional

☐

Continuation-in-part (CIP) of prior application

☐

Amend the specification by inserting before the first line the sentence: --This application is a application Serial No. , filed , now allowed.--

☐

Cancel in this application original claims ____ of the prior application before calculating the filing fee .
(At least the original independent claim must be retained for filing purposes.)

☐

The prior application is assigned of record to Medtronic, Inc.

☐

Th Power of Attorney in the prior application is to: ____.

☐ This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) _____, filed _____.

X Address all future correspondence to: Michael C. Soldner, Reg. No. 41,455
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FEE CALCULATION	No. of Claims Filed			Claims Included in Base Fee	No. of Extra Claims	Rate	Fee
Total Claims	41	20	=	21		x 18	\$378.00
Independent Claims	3	3	=	0		x 84	\$0.00
Multiple Dependent Claims					0	+ 280	
Basic Filing Fee							\$750.00
TOTAL							\$1,128.00

X Charge Deposit Account No. 13-2546 in the amount of \$1,128.00 for the filing fee.

X The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

August 25, 2003

Date



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